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Complete if Known

Application Number	10/580187
Filing Date	
First Named Inventor	Graciano De Oliveira et al.
Art Unit	
Examiner Name	
Attorney Docket Number	PF030176

(Use as many sheets as necessary)

Sheet	1	of	2
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[illegible][illegible]Date
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Substitute for form 1449B/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Application Number	10/580187
				Filing Date	
				First Named Inventor	Graciano De Oliveira et al.
				Art Unit	
				Examiner Name	
Sheet	2	of	2	Attorney Docket Number	PF030176

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